BEST AVAILABLE COPY

Application or Docket Number

| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 1506.1014 | | | | | | | | | | | · | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|---------------------------|---------------------------------------------|------------------|-----------------|--------------------------|------------------------|---------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------|--|--|--|--|--|--|--|--|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | | | | | | | | | |
| TO | TAL CLAIMS | | 10 | | | RAT | E | FEE | | RATE | FEE | | | | | | | | | |
| FOR | | | NUMBER FILED NUMBER EXTRA | | | BASIC | FEE | 370.00 | OŖ | BASIC FEE | 740.00 | | | | | | | | | |
| TOTAL CHARGEABLE CLAIMS | | | / O minus 20= | | | / X\$ 9= | | OR | X\$18= | _ | | | | | | | | | | |
| INDEPENDENT CLAIMS | | | 8 minus 3 = * . | | | X42= | | | OR | X84= : | 420 | | | | | | | | | |
| MU | LTIPLE DEPEN | DENT CLAIM PR | RESENT | | | +140= | | OŘ | +280= | | | | | | | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTAL | 1160 | | | | | | | | | |
| CLAIMS AS AMENDED - PART II OTHER THAN | | | | | | | | | | | THAN | | | | | | | | | |
| | | (Column 1) | | (Column 2) | (Column 3) | SM/ | ALL I | | OR | SMALL | | | | | | | | | | |
| NTA | | REMAINING AFTER/ AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RA | TE. | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | | | | | | | |
| AMENDMENT | Total | | Miĥus | | = . | X\$ | 9= | | OR | X\$18= | | | | | | | | | | |
| NE NE | Independent | | Minus | | | . X4 | 2= | | OR | X84= | | | | | | | | | | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +14 | 0= | | OR | +280= | | | | | | | | | | |
| | (Column 2) (Column 3) | | | | | | OTAL | (100 ±3. Sagista | OR | TOTAL | | | | | | | | | | |
| | | | | | | | ADDIT. FEE OH ADDIT. FEE | | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS BEMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | ΤΕ | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE» | | | | | | | | | |
| | Total / | | Minus | ** | = . | X\$ | 9= | | OR | X\$18= | | | | | | | | | | |
| | Independent | ************************************** | Minus | *** | = 4 ₂ | /X4 | 2= | | ОЯ | X84≡ | | | | | | | | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 10= | | OR | +280= | | | | | | | | | | |
| | \int | | | | | | OTAL | , | OR | TOTAL | | | | | | | | | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | ADDIT. FEE | | | ADDIT. FEE | | | | | | | | | | |
| F. | | CLAIMS | | HIGHEST | | 7 | | ADDI- | 1 | | ADDI- | | | | | | | | | |
| | / | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT | R/A | TE | TIONAL FEE | | RATE | TIONAL FEE | | | | | | | | | |
| AMENDMENT C | Total | | Minus | ** | = . | X\$ | 75€ | | OR | X\$18= | | | | | | | | | | |
| | Independent | * | Minus | *** | - | | 2= | | OF | X84= | | | | | | | | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | 4 | 40= | | 1 | | | | | | | | | | | |
| * if the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | OR | - | E | | | | | | | | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE | | | | | | | | | | | | | | | | | | | | |
| 1 | The Highest Nu | mber Previously P | aid For (Total | or Independent) is th | e highest num | ber found in | the a | opropriate b | ox in c | The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |